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APPLICANTS

Majid Rabbani, Pittsford, NY;

Aaron T. Deever, Rochester, NY;

** CONTINUING DATA *****

No JBJL

** FOREIGN APPLICATIONS *****

No JBJL

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

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Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY NY	SHEETS DRAWING 16	TOTAL CLAIMS 20	INDEPENDENT CLAIMS 3
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged Examiner's Signature: <i>Jonathan</i> Initials: <i>JS</i>				

ADDRESS

Mark G. Bocchetti
 Patent Legal Staff
 Eastman Kodak Company
 343 State Street
 Rochester, NY
 14650-2201

TITLE

Digital image compression utilizing shrinkage of subband coefficients

FILING FEE RECEIVED 900	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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